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TRANSMITTAL
FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

20

Application Number

09/940,698

Filing Date

08/27/2001

First Named Inventor

George Jackowski

Art Unit

1641

Examiner Name

Gary W. Counts

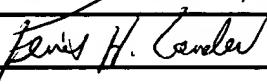
Attorney Docket Number

2132.022

ENCLOSURES (Check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input checked="" type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment/Reply	<input checked="" type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input type="checkbox"/> Other Enclosure(s) (please Identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Reply to Missing Parts/ Incomplete Application	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	McHale & Slavin, P.A.		
Signature			
Printed name	Ferris H. Lander		
Date	7/8/2005	Reg. No.	43,377

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Signature			
Typed or printed name	Debra N. Gerstemeier	Date	7-8-2005

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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FEE TRANSMITTAL

for FY 2005

Effective 10/01/2004. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 750.00)

Complete if Known

Application Number	09/940,698
Filing Date	08/27/2001
First Named Inventor	George Jackowski
Examiner Name	Gary W. Counts
Art Unit	1641
Attorney Docket No.	2132.022

METHOD OF PAYMENT (check all that apply)

Check Credit card Money Order Other None

Deposit Account:

Deposit Account Number
50-1803

Syn X Pharma, Inc.

The Director is authorized to: (check all that apply)

- Charge fee(s) indicated below Credit any overpayments
 Charge any additional fee(s) or any underpayment of fee(s)
 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION**1. BASIC FILING FEE**

Large Entity	Fee Code (\$)	Fee	Small Entity	Fee Code (\$)	Fee	Fee Description	Fee Paid
1001	790	2001	395			Utility filing fee	
1002	350	2002	175			Design filing fee	
1003	550	2003	275			Plant filing fee	
1004	790	2004	395			Reissue filing fee	
1005	160	2005	80			Provisional filing fee	
SUBTOTAL (1)		(\$)					

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims	Extra Claims	Fee from below	Fee Paid
	-20** =		
Independent Claims	- 3** =		
Multiple Dependent			

Large Entity	Fee Code (\$)	Fee	Small Entity	Fee Code (\$)	Fee	Fee Description	
1202	18	2202	9			Claims in excess of 20	
1201	88	2201	44			Independent claims in excess of 3	
1203	300	2203	150			Multiple dependent claim, if not paid	
1204	88	2204	44			** Reissue independent claims over original patent	
1205	18	2205	9			** Reissue claims in excess of 20 and over original patent	
SUBTOTAL (2)		(\$)					

**or number previously paid, if greater; For Reissues, see above

3. ADDITIONAL FEES

Large Entity	Fee Code (\$)	Fee	Small Entity	Fee Code (\$)	Fee	Fee Description	Fee Paid
1051	130	2051	65			Surcharge - late filing fee or oath	
1052	50	2052	25			Surcharge - late provisional filing fee or cover sheet	
1053	130	1053	130			Non-English specification	
1812	2,520	1812	2,520			For filing a request for ex parte reexamination	
1804	920*	1804	920*			Requesting publication of SIR prior to Examiner action	
1805	1,840*	1805	1,840*			Requesting publication of SIR after Examiner action	
1251	110	2251	55			Extension for reply within first month	
1252	430	2252	215			Extension for reply within second month	
1253	980	2253	490			Extension for reply within third month	
1254	1,530	2254	765			Extension for reply within fourth month	
1255	2,080	2255	1,040			Extension for reply within fifth month	
1401	340	2401	170			Notice of Appeal	
1402	340	2402	170			Filing a brief in support of an appeal	
1403	300	2403	150			Request for oral hearing	
1451	1,510	1451	1,510			Petition to institute a public use proceeding	
1452	110	2452	55			Petition to revive - unavoidable	
1453	1,370	2453	685			Petition to revive - unintentional	
1501	1,370	2501	685			Utility issue fee (or reissue)	
1502	490	2502	245			Design issue fee	
1503	660	2503	330			Plant issue fee	
1460	130	1460	130			Petitions to the Commissioner	
1807	50	1807	50			Processing fee under 37 CFR 1.17(q)	
1806	180	1806	180			Submission of Information Disclosure Stmt	
8021	40	8021	40			Recording each patent assignment per property (times number of properties)	
1809	790	2809	395			Filing a submission after final rejection (37 CFR 1.129(a))	
1810	790	2810	395			For each additional invention to be examined (37 CFR 1.129(b))	
1801	790	2801	395			Request for Continued Examination (RCE)	
1802	900	1802	900			Request for expedited examination of a design application	
Other fee (specify) _____							

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$ 750.00)

The **Fee Paid** items (s) listed did not receive the following:

Check 67.30, 1.00

750.00

SUBMITTED BY

(Complete if applicable)

Name (Print/Type)	Ferris H. Lander	Registration No. (Attorney/Agent)	43,377	Telephone	(561) 625-6575
Signature	Ferris H. Lander			Date	2/8/2005

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

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